
**HOUSING FINANCE AUTHORITY OF LEON COUNTY
FOR THE CITY OF TALLAHASSEE AND LEON COUNTY**

Local Government Area of Opportunity Funding Loan Application

**THIS APPLICATION IS SOLELY FOR THE USE OF APPLICANTS SEEKING LOCAL GOVERNMENT
AREA OF OPPORTUNITY FUNDING IN CONJUNCTION WITH FHFC RFA 2022-201**

SUBMIT THE ORIGINAL, ONE COPY AND A PDF OF THE ENTIRE APPLICATION
& APPLICATION FEE OF \$5,000 (CHECK MADE TO HFA of LEON COUNTY) TO:

HOUSING FINANCE AUTHORITY OF LEON COUNTY
ATTENTION: JEFFREY SHARKEY, CHAIRMAN
615 PAUL RUSSELL ROAD
TALLAHASSEE, FLORIDA 32301

SUBMIT ONE (1) COPY AND A PDF OF THE ENTIRE APPLICATION
& REVIEW FEE OF \$3,000 (CHECK MADE TO THE HENDRICKSON COMPANY)

THE HENDRICKSON COMPANY
1404 ALBAN AVENUE
TALLAHASSEE, FLORIDA 32301
mark@thehendricksoncompany.com
850.671.5601

REVISED September 1, 2022

GENERAL INFORMATION

NOTE: If any of the five Project Threshold Criteria are not met, then the application will not be considered. If an application is approved, then the City and/or County will determine the loan terms for the local government support, including any other terms required by the HFA of Leon County, the City of Tallahassee and/or Leon County (including, but not limited to, the applicant paying legal fees and all costs related to the local government support loan).

Please indicate if Applicant will use these funds in conjunction with (check one)

FHFC HOUSING CREDIT RFA # 2022-201: Local Government Area of Opportunity Funding

LOCAL GOVERNMENT CONTRIBUTION LOAN REQUEST: Please provide the details of your request for a Local Government Area of Opportunity Funding loan, including the requested loan amount and loan terms, including interest rate, maturity date, amortization, and balloon (if any). **The maximum amount of the Local Government Area of Opportunity Funding loans funded pursuant to this NOFA is the amount that will allow an Applicant to receive the maximum points or preference for the Local Government Area of Opportunity Funding. One loan made in conjunction with FHFC RFA 2022-201 will be in the dollar amount necessary to score the maximum amount of points for the Local Government Area of Opportunity Funding, while another loan will be in the dollar amount necessary to score the maximum number of points for the Local Government Contribution.**

LOAN AMOUNT REQUESTED: _____
MATURITY OF LOAN IN YEARS: _____
INTEREST RATE: _____
AMORTIZATION: _____
BALLOON, IF ANY: _____
VALUE OF CONTRIBUTION FOR FHFC APPLICATION PURPOSES: _____
EXPLANATION AND CALCULATION: _____

I. DEVELOPMENT SUMMARY AND TIMELINE

A. Provide a short narrative description of the Development, including all amenities, unit features and scope of work to be performed. MAJOR DEVELOPMENT AMENITIES WILL BE INCLUDED IN THE LAND USE RESTRICTION AGREEMENT AND/OR THE LOW-INCOME HOUSING AGREEMENT, IF APPLICABLE. Also attach as Exhibit 1 (i) a timeline for the completion of the development which includes all key dates, including anticipated timing of permits and credit underwriting, bond closing date,

completion of construction, rent up, and stabilization, and (ii) a map showing the location of the proposed development.

B. Attach as Exhibit 2 a narrative description of how this application meets **all threshold and selection criteria** for Local Government Contribution Funding, as detailed in the associated NOFA. Include as an addendum to the narrative your anticipated score related to the FHFC scoring, including all tiebreakers. and provide a written narrative that explains the anticipated score in detail.

C. SUMMARY OF PROPOSED DEVELOPMENT

| | |
|--|--|
| | |
| Name of Development | |
| Location of Development, by street address, or if no address, by mileage from nearest cross streets. | |
| County Commission Commissioner Name and District Number | |
| Developer/Developer Location (name of controlling company, not of LP or LLC). | |
| Contact person for application, including name, email, and phone numbers | |
| Local Contribution Amount Requested | |
| Development Construction Type Garden, Mid-Rise, High-Rise, Other (explain) | |
| Development Construction Type New Construction or Rehabilitation Concrete, Wood or other (explain) | |
| Development Demographic Family, Elderly, or other | |
| Total Number of Units Number of Units by Bedroom | |
| Number of Buildings | |
| Number of Stories in Each Building | |
| Total Development Cost | |
| Cost per unit | |
| Land Cost | |
| Acquisition of Building Cost if applicable | |
| Hard Rehab Cost or Construction Cost | |
| General Contractor | |
| Set Aside Period (must be perpetuity) | |
| Set Aside Levels (PROJECT THRESHOLD CRITERIA) Number of Bedrooms by AMI Level, as will be used for Housing Credit Basis | |
| Current Zoning (PROJECT THRESHOLD CRITERIA) | |
| Evidence of Site Control (PROJECT THRESHOLD CRITERIA) | |

II. APPLICANT INFORMATION

A. Applicant Name: _____

Must be a legally formed entity (i.e., limited partnership, corporation, etc.) qualified to do business in the State of Florida at the time of submission of Application.

B. If partnership, name of general partner(s): _____

If corporation, name and title of executive officer: _____

Address: _____

Telephone: _____ Facsimile: _____

III. PROPOSED PROJECT FINANCING

A. Proposed Finance Summary: Please provide as Exhibit 3 a permanent loan period detailed sources and uses that is in a format acceptable to FHFC as part of RFA 2022-201. Also include a 15-year operating pro forma.

IV. ABILITY TO PROCEED

Each Application shall be reviewed for feasibility and ability of the Applicant to proceed with construction of the Development.

A. Site Control (PROJECT THRESHOLD CRITERIA)

Site Control must be demonstrated by the APPLICANT. At a minimum, a Contract for Purchase and Sale must be held by the Applicant for the proposed site. The buyer **MUST** be the Applicant. Indicate which form of site control is provided:

Contract for Purchase & Sale

Recorded Deed

Long-Term Lease: If site control is demonstrated by long-term lease, a copy of the executed lease must be provided.

IMPORTANT: If site control is not held by the Applicant, a fully executed, enforceable **contract for purchase and sale or assignment of contract** must be provided which obligates the seller or assignor to transfer the site to the Applicant contingent **ONLY** upon the award of Financing from the Authority or FHFC. Attach Evidence of Site Control as Exhibit 4.

Note: Use of the FHFC form **will NOT** meet this requirement

B. Zoning and Land Development Regulations (PROJECT THRESHOLD CRITERIA)

1. a. Is the site appropriately zoned for the proposed Development: No ___ Yes ___
- b. Indicate zoning designation (s) _____
- c. Current zoning permits ___ units per acre, or ___ for the site (PUD).
- d. Total Number of Units in Development:

Note: at a minimum, the current, applicable Future Land Use Map Designation and associated Local Government Comprehensive Plan Future Land Use Element provisions must permit the proposed Development. (PROJECT THRESHOLD CRITERIA)

2. New Construction Zoning and Land Development Regulation Development Requirements:

Applicant must provide a letter from the appropriate local government official that the Development is consistent with zoning and land development regulations, which verify that the site is appropriately zoned and consistent with local land use regulations regarding density and intended use. **To meet minimum requirements, attach a letter from the appropriate local government official verifying that the current, applicable Future Land Use Map Designation and associated Local Government Comprehensive Plan Future Land Use Element provisions permit the proposed Development.** Attach the local government verification letter as Exhibit 5.

3. Rehabilitation Zoning and Land Development Regulation Development Requirements:

Applicant must provide a letter from the appropriate local government official that the Development is consistent with zoning and land development regulations, which verify that the site is appropriately zoned and consistent with local land use regulations regarding density and intended use. **To meet minimum requirements, attach a letter from the appropriate local government official verifying that the current, applicable Future Land Use Map Designation and associated Local Government Comprehensive Plan Future Land Use Element provisions permit the proposed Development.** Attach the local government verification letter as Exhibit 5.

Note: Provision of the zoning form from FHFC RFA 2022-201 will meet this requirement. Provide evidence that the proposed use is permitted and attach as Exhibit 5.

C. Site Location (PROJECT THRESHOLD CRITERIA)

Applicant must provide evidence that the site is located within the City limits of the City of Tallahassee or urban services area of Leon County.

V. CERTIFICATION (Original Signatures Required)

The undersigned Applicant certifies that the information in this Application is true, correct and authentic.

THE APPLICANT FURTHER ACKNOWLEDGES HAVING READ ALL APPLICABLE AUTHORITY RULES GOVERNING THE PROGRAM AND ACKNOWLEDGE HAVING READ THE INSTRUCTIONS FOR COMPLETING THIS APPLICATION.

THE APPLICANT UNDERSTANDS AND AGREES TO ABIDE BY THE PROVISIONS OF THE APPLICABLE FLORIDA STATUTES AND AUTHORITY PROGRAM POLICIES, RULES AND GUIDELINES.

THE UNDERSIGNED REPRESENTS AND WARRANTS THAT THE INFORMATION PROVIDED HEREIN IS TRUE AND ACCURATE. THE PERSON EXECUTING THIS DOCUMENT REPRESENTS THAT HE OR SHE HAS THE AUTHORITY TO BIND THE APPLICANT AND ALL INDIVIDUALS AND ENTITIES NAMED HEREIN TO THIS WARRANTY OF TRUTHFULNESS AND COMPLETENESS OF THE APPLICATION.

THE APPLICANT ACKNOWLEDGES THAT THE AUTHORITY’S INVITATION TO SUBMIT AN APPLICATION DOES NOT CONSTITUTE A COMMITMENT TO FINANCE THE PROPOSED DEVELOPMENT. **BEFORE THE AUTHORITY CAN CLOSE A LOAN THE PROPOSED DEVELOPMENT MUST RECEIVE AN ALLOCATION OF HOUSING CREDITS AND APPLICANTS MUST SUCCESSFULLY COMPLETE CREDIT UNDERWRITING AND OBTAIN ALL NECESSARY APPROVALS FROM THE BOARD OF DIRECTORS, AUTHORITY COUNSEL, BOND COUNSEL, THE CREDIT UNDERWRITER AND CITY COMMISSION AND STAFF.**

Applicant

Date

Signature of Witness

Name and Title ((typed or printed)

Name (typed or printed)

NOTE: ORIGINAL APPLICATION MUST CONTAIN AN ORIGINAL SIGNATURE, OR THE APPLICATION WILL BE REJECTED AUTOMATICALLY